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1 2:07PM



PETER BROWNING, DIRECTOR HOWARD LEIBRAND, M.D., HEALTH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR PHONE: (360) 336-9401

OPERATION-MAINTENANCE & MONITORING REQUIREMENT FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

This form must be recorded before permit approval
NOTICE OF ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT
(DESIGN)

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GRANTOR: (1	NAME OF (OWNER)_ん	DAYNE GA	HZDEWER		
GRANTEE: S		UNTY				
ADDRESS	11197	SECUND	STREAT	- MT. VE.	avor u	PA 98273
PARCEL#_	PIL	7219	A. A.			
LEGAL DESC	RIPTION:		N.A	J. Phys.		
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THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT COUNTY CODE 12.05.120 AND WASHINGTON ADMINISTRATIVE CODE 246-272A-0015 and 0270:

- 1. Maintenance & Monitoring Required: The septic system to be installed on this lot will require annual or more frequent as required scheduled maintenance and monitoring
- 2. Contract Required: A contract for perpetual maintenance and monitoring must be obtained before the onsite sewage disposal system is put into use.
- 3. Maintenance Specialist Required: The person performing this service must be certified by the Skagit County Health Department.

I have read and fully understand the conditions contained within this notification. For witnessing or attesting a signature: State of Washington, County of Skagit	O WILL AND STANDING
(Owner signature) Asses A Color date 4/2 x/28	OF WASHING
Signed or attested before on 418/08 by (Signature of Notary)	
My appointment ex	pires 7/9/201/